

FROST BROWN TODD LLC

2200 PNC CENTER
201 EAST FIFTH STREET - P.O. BOX 5715
CINCINNATI, OHIO 45201-5715
(513) 651-6800
FAX NUMBER: (513) 651-6981
COMMUNICATIONS CENTER (513) 651-6775
FAX COVER SHEET

FAX RECEIVED
AUG 13 2001
GROUP 1600

**TOTAL NUMBER OF PAGES
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25

TO: U.S. PATENT OFFICE

ATTN: GAIL GABEL

FAX NO.: 703-308-4242

FROM: Julie A. Lape

TELEPHONE NO.: 513-651-6139

DATE: August 13 2001

CONFIRM FAX SENT/RETURN ORIGINAL TO: JULIE LAPE **EXT.:** 6139

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NEW ALBANY, IN (812) 948-7994
NASHVILLE, TN (615) 251-5551
LEXINGTON, KY (859) 231-0011

No Original Docs will follow unless requested

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23

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AUG 13 2001

GROUP 1600

TO: Gail Gabel

FAX NO.: 703-308-4242

FROM: Stephen Albainy-Jenei

TELEPHONE NO.: 513-651-6839

DATE: 3/13/01

CONFIRM FAX SENT/RETURN ORIGINAL TO: S. Prewitt **EXT.:** 6974

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AUG. 13. 2001 8:28AM

FROST BROWN TODD LLC

NO. 3288 P. 3

P. 1

* * * COMMUNICATION RESULT REPORT (MAR. 13. 2001 12:35PM) * * *

TTI FROST & JACOBS

FILE MODE	OPTION	ADDRESS (GROUP)	RESULT	PAGE
0403 MEMORY TX		G3-F : 220082116917033084242	OK	23/23

REASON FOR ERROR
E-1) HANG UP OR LINE FAIL
E-3) NO ANSWER

E-2) BUSY
E-4) NO FACSIMILE CONNECTION

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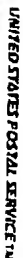
FROM: Stephen Albainy-Jenei

TELEPHONE NO.: 513-651-6839

DATE: 3/13/01

CONFIRM FAX SENT/RETURN ORIGINAL TO: S. Prewitt

EXT. 6074



EK652697331US

**SEE REVERSE SIDE FOR
SERVICE GUARANTEE AND
INSURANCE COVERAGE LIMITS**

Customer Copy

ZIP CODE		DAY OF DELIVERY		FIRST RATE ENVELOPE	
100-000000		100-000000		100-000000	
DATE IN		DATE IN		POSTAGE	
100-000000		100-000000		100-000000	
MO. DAY		MO. DAY		100-000000	
100-000000		100-000000		100-000000	
TIME IN		TIME IN		100-000000	
100-000000		100-000000		100-000000	
MILLAGE		MILLAGE		100-000000	
100-000000		100-000000		100-000000	
INT. APT. COUNTRY CODE		INT. APT. COUNTRY CODE		100-000000	
100-000000		100-000000		100-000000	
ACCEPTANCE CLERK INITIALS		ACCEPTANCE CLERK INITIALS		100-000000	
100-000000		100-000000		100-000000	
TOTAL POSTAGE		TOTAL POSTAGE		100-000000	
100-000000		100-000000		100-000000	
COD FEE		COD FEE		100-000000	
100-000000		100-000000		100-000000	
INSURANCE FEE		INSURANCE FEE		100-000000	
100-000000		100-000000		100-000000	

CUSTOMER USE ONLY

METHOD OF PAYMENT:

74527061

918307425

Medical Agency, P.O. Box 111
Yuba City, Texas 79601

☐ **WANTED OR SIGNATURE** (Domestic Only) Additional merchandise purchased in void if signature is required. Void delivery to be made without obtaining signatures of addressee or addressee's agent if delivery employee judges that articles can be left in secure location and authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY ☐ Week ☐ Holiday _____

NO DELIVER

{ Week end

Modbury

Customer Signature

FROM: PLEASE PRINT

PHONE 313-633-1600

TO: PLEASE PRINT

PHASE 1

For Your Self

CONFIDENTIAL **0018** **65-2797**

2017-18

546.341:625

Dr. J. H. C. Jansen

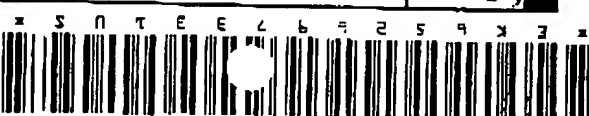
ASSISTANT ATTORNEY GENERAL
HOWEON-YU JUNG
WASHINGTON, D.C. 20531

FOR PICKUP OR TRACKING CALL 1-800-222-1817

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1.8081 11-B Scientific 1975



FROST BROWN TODD LLC		10019	Assistant Commissioner for Trademarks	02/13/01	CHECK NO.	231028
INVOICE DATE	INVOICE NO.	GL NO.	DESCRIPTION	AMOUNT		
02-13-2001	02132001E	11111110000 91830. 625 (96.041)	2 MO. EXT OF 195.00	195.00		
TOTAL				195.00		

No. SERIAL NO. 09/167,088 EK652697331US
Of INVENTORS: FRED FINKELMAN, ET. AL.
For METHODS FOR MEASURING IN VIVO CYTOKINE
PRODUCTION
Action AMENDMENT TRANSMITTAL; AMENDMENT AND RESPONSE;
REQUEST FOR 2 MONTH EXTENSION OF TIME; FILING FEE;
CERTIFICATE OF EXPRESS MAILING; RETURN POSTCARD
SRA/RWoods 91830/.625 2/13/01
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